### PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS IPO AND EXCLUSION OF SPOUSE, Name: Jerrold UNITED STATES HOUSE OF REPRESENTATIVES E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? C. Did you or your spouse have "earned" income (e.g., salaries, honorarta, or pension/IRA distributions) of \$200 or more during the B. Did you, your spouse, or your dependent child purchase, sell, or A. Did you, your spouse, or your dependent child: 2020 FINANCIAL DISCLOSURE STATEMENT EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer 'yes' unless you have first consulted with the Committee on Ethics. IPO – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance. liability (more than \$10,000) at any point during the reporting period? D. Did you, your spouse, or your dependent child have any reportable exchange any securities or reportable real estate in a transaction TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethios and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? reporting period? exceeding \$1,000 during the reporting period? REPORT FILER STATUS b. Receive more than \$200 in unearned income from any reportable a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or asset during the reporting period? 2020 Annual (Due: May 17, 2021) House of Representatives Member of the U.S. -ewis Malle Daytime Telephone: DEPENDENT, OR TRUST INFORMATION - ANSWER FACH OF THESE State: District Yes Yes ¥es ¥**8** ¥88 X X Amendment 종 Ö 중 중 <u>\$</u> For Use by Members, Officers, and Employees X H. Did you, your spouse, or your dependent child receive any G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$415 in value from a single F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" \$415 in value from a single source during the reporting period? reportable travel or reimbursements for travel totaling more than lieu of paying you for a speech, appearance, or article during the Did any individual or organization make a donation to charity in year up through the date of filing? source during the reporting period Form A Employee Officer or **Employing Office** Termination Date of Termination: A \$200 penalty shall be assessed against any Individual who files more than 30 days late. HAND DELINER FROM 1 of 5 FLERIST WITH USCOUNTS SALIVINGS CENTER 2021 JUMPES 中 中 2010 1202 QUESTIONS Shared Staff Filer Type: (If Applicable) Yes ¥es ¥es ĕ Yes **86** ¥ 85 X § Principal Assistant 중 7 ş 몽 ₹ Š $\nabla$ X X

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# SCHEDULE C - EARNED INCOME

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraris; list only the source for other spouse earned income exceeding \$1,000. See examples below. INCOME LIMITS and PROHIBITED INCOME: The 2020 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,845. The 2021 limit is \$29,595 in addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. Examples: ty University of New York Onlario County Board of Education Source (include date of receipt for honoraria) Employee Retirement System Employee Retirement system Spacse Salery Spease Salary Spause Pension Pensian Assayayad Tesching Fee Spotter Speech Spouse Salary Туре 21731 4 Amount 000 FS 000 BJS 000 BJS

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owned to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

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## SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calandar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political editties (such as political parties and campaign organizations); and positions solely of an honorary nature.

			Position
			Name of Organization

## SCHEDULE F - AGREEMENTS

Name: Jerrold Lewis Waller Page '오,

employer. identify the date, parties to, and general terms of any agreement or amangement that you have with respect to: tirture employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former Date NYS Employee het ironent Parties to Agreement びるとアンスの provide ړ ډ Terms of Agreement Now York State Employ rension

### SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$415 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbylst or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$166 or less need not be added towards the \$415 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

Source	Description	Value
Example: Mr. Joseph Smith, Arlington, VA	Silver Pietter (prior determination of personal friendship received from the Committee on Etrics)	\$500
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